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# Collier Shannon Scott



April 11, 2005

Commissioner for Patents  
Customer Service Window  
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Randolph Building  
401 Dulany Street  
Alexandria, VA 22314

**Re: U.S. Patent Application No. 10/600,712  
For: Filtered Cigarette Incorporating a Breakable Capsule  
Our Reference: 14150-00601**

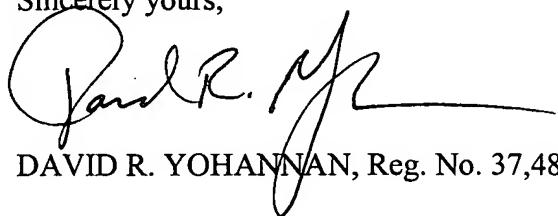
Dear Sir:

Transmitted herewith for filing in the U.S. Patent and Trademark Office in connection with the above-referenced application are the following documents:

- (1) Transmittal Form (1 page);
- (2) Fee Transmittal (1page);
- (3) Petition for Two-Month Extension of Time (1 page);
- (4) Response To Office Action (14 pages);

Please date-stamp the enclosed copy of this letter, thereby acknowledging receipt of the above-identified documents.

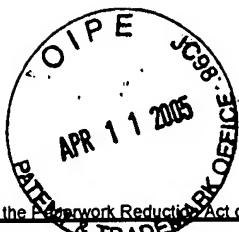
Sincerely yours,



DAVID R. YOHANNAN, Reg. No. 37,480

Enclosures

DRY/rlw



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## TRANSMITTAL FORM

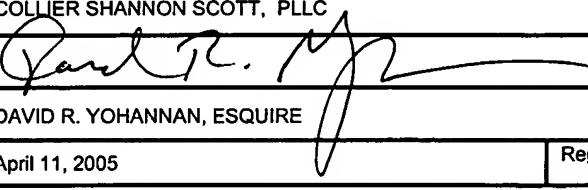
(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/600,712
Filing Date	23 June 2003
First Named Inventor	DUBE, Michael F.
Art Unit	1731
Examiner Name	WALLS, Dionne A.
Total Number of Pages in This Submission	17
Attorney Docket Number	14150-00601

ENCLOSURES (Check all that apply)			
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):	
Remarks			

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	COLLIER SHANNON SCOTT, PLLC		
Signature			
Printed name	DAVID R. YOHANNAN, ESQUIRE		
Date	April 11, 2005	Reg. No.	37,480

### CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

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